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APPLICANTS

David A. Holcomb, Seattle, WA;  
 Jason O. Germany, Seattle, WA;

**NONE  
RIP**

\*\* CONTINUING DATA \*\*\*\*\*

**NONE  
RIP**

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 03/24/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 5	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
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Verified and Acknowledged  
 Examiner's Signature: *Thomas Ruel* Initials

ADDRESS  
 00500  
 SEED INTELLECTUAL PROPERTY LAW GROUP PLLC  
 701 FIFTH AVE  
 SUITE 6300  
 SEATTLE, WA  
 98104-7092

TITLE  
 Shellfish dressing device and method

FILING FEE  RECEIVED 482	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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